

Office of Juvenile Justice and Delinquency Prevention (OJJDP)
Juvenile Accountability Block Grant (JABG) Program

TECHNICAL ASSISTANCE REQUEST FROM

To assist the National Training and Technical Assistance Center (NTTAC) respond to your need, please complete this form. Upon receipt of your completed form, an NTTAC Technical Assistance Coordinator will contact you to discuss your request.

Date: _____

Requesting JABG Designated State Agency: _____

State Level JABG Coordinator: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Please mark (X) the JAIBG purpose areas that are addressed by your program:

<input type="checkbox"/>	Area 1: Graduated sanctions. (New)
<input type="checkbox"/>	Area 2: Corrections/detention facilities.
<input type="checkbox"/>	Area 3: Court staffing and pretrial services.
<input type="checkbox"/>	Area 4: Prosecutors (staffing).
<input type="checkbox"/>	Area 5: Prosecutors (funding).
<input type="checkbox"/>	Area 6: Training for law enforcement and court personnel. (New)
<input type="checkbox"/>	Area 7: Juvenile gun courts.
<input type="checkbox"/>	Area 8: Juvenile drug courts.
<input type="checkbox"/>	Area 9 Juvenile records system. (New)
<input type="checkbox"/>	Area 10: Information sharing.
<input type="checkbox"/>	Area 11: Accountability.
<input type="checkbox"/>	Area 12: Risk and needs assessment. (New)
<input type="checkbox"/>	Area 13: School safety.

	Area 14: Restorative justice. (New)
	Area 15: Juvenile courts and probation.
	Area 16: Detention/corrections personnel. (New)

1) Please describe as specifically as possible the condition, problem, or issue for which training or technical assistance (TA) is requested.

2) Please describe what type of training or technical assistance you would like to receive. Provide an estimate on the amount of funds your organization has available to pay for any training or technical assistance. If requesting funding, please attach a copy of projected costs.

3) Who is the intended audience of technical assistance?

4) Please describe what you would like to achieve as the result of receiving training or technical assistance. How will training or technical assistance assist you in implementing JAIBG activities?

5) Have there been any previous attempts to address the problem or issue? If so, what actions were taken and what were the results of these efforts?

6) Are there any specific consultants or sources from whom you would like to receive technical assistance? If so, please include their contact information. If not, are there any specific areas of expertise (such as detention/corrections, juvenile court process, drug courts, youth courts, prosecution, school safety, management information systems, drug testing, accountability-based sanctions, law enforcement, Balanced and Restorative Justice, strategic planning, program evaluation, etc.) that would be helpful?

7) Date request needs to be filled: _____

Please return this form to the:

Office of Juvenile Justice and Delinquency Prevention
State Relations and Assistance Division
810 7th Street, NW
Washington, DC 20531
(202) 307-5924 (phone)
(202)307-2819 (fax)
<http://ojjdp.ncjrs.org/>